## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10002861-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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Inventor's Signature

Date

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10002861-1

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Inventor's Signature		Date		
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Residence:	875 NW Ermine Place Corvallis,O	regon 97	330-3718	
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Inventor's Signature		Date		
Full Name of # 5 joint inventor	:		Citizenship:_	
Residence:				
Post Office Address:				
Inventor's Elementure		Date		
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Full Name of # 6 joint inventor	r:		Citizenship:	
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Full Name of # 7 joint invento	r:		_ Citizenship:	
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Full Name of # 8 joint invento	or:		— Orazensinb	
Residence:				
Post Office Address:				
Inventor's Signature		Date		